			CATION	persons ens régal I FEE DETE de for Form PT	RMINATION				tog or Doctor N.	
		CLAIMS AS	FILED		· .	SMALL		OR	OTHE	R THAN ENTITY
FOR NUMBER FILED			NUMBER EXTRA		RATE	FEE		RATE	ÆE	
ASIC FEE: 97 CFR 1.18(d)					•	8:	OR			
II.	V. CLANS FR 1.18(d)		minus 20 =			× • •	•	-OR	11.	
DEPENDENT CLAMS 7 OFR 1.18(N)		65	edeus 3 *			x e •	·	OR	31.	,
		NT CLÁM PRESE	NT C	57 OFR 1.10(6)	+1 =	<u> </u>	a.			
•	e difference in a	olumi 1 la leca th	69.2600 e	nter "O" in column :	TOTAL		OR	TOTAL	7	
_		• •	•				•			
•	G	laims as an	ENUED	- PARI II				• :.	. CITALEI	R THAN
	(Column 1) (Column 2) (Column 3)					8MALL (ENTITY	OR .		ENTITY
	•	CLAIMS REMAINING AFTER AMERICMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		. RATE	ADDI- TIONAL FEE
I	Total GF GFE 1.MEG)	. 84	Minus	77	• 7	X 2 . D.		OR	.四.	3500
ı	(27 cFit 1.300)	. 10	Minus	- 12	. 0	x 8=		· OR	x e	
ı	FREST PRESENTATION OF MULTIPLE DESIGNATION CLAIM (47 CFR 1.18(45)					+8		OR	+2	
	•					TOTAL ADO'L FEE		OR	TOTAL ADDIL FEE	35000
8	3.23.06	(Column 1)		(Column 2)	(Column 3)	:	•		·	
	grs.	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT	RATE	ADDI- TIONAL FEE]	RATE	ACX TIQTU
ı	Total gram umpe	84	Minus	84	•	I X C		OR	×i	/ ×
l	Independent (27 CFR L1980)	10	Minus	- 10		x		OR	x 0 / 10/	
ı	FWEST PRESENT	PATION OF MALTER	LE 067610	911 OLAIM (07 O	FR L. SE(EE)	1X		OR	+.	
						TOTAL /		OR	TOTAL ADD'L FEE	
1	1-27-06	(Column 1)		(Cohema 2)	(Column 5)					•
		CLAIMS REMARING AFTER AMENDMENT	·	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE	٠.	RATE	ADDI- TIONAL PEE
	Total	54	When	- 84	1- /	X .	1	OR	× .	1.
	(Independent)	10	Minus	10	- //	**	1	oR.	* *	1.
	-	ATION OF MAILTIP	L 18 8 1	DET CLASH AT C	FIR IL HÉROTO	+30	1.	OR.		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
_	1.81,1	01, 124	101		15,148	TOTAL ADDIL FEE	-\-	or or	TOTAL ADOLFEE	
1		-11 101 k	101		1-11T0	. ALVETE .		· ~~	AUCTUS	

Including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the sentent of time you require to complete application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the sentent of time you require to complete this form and/or suggestions for neturing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademicst Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, 8500 TO: Commissioner for Petents, P.O. Box 1450, Alexandria, VA 22313-1450.

[50] [50] If you need assistance to completing the form, call 1-800-PTO-9199 and salest option 2.